

Permit NO. _____

TREE REMOVAL APPLICATION

Town of Moncks Corner

Planning Department

Date: _____

Property Owner: _____
Owner Address: _____
Owner Phone Number: _____
Applicant: _____
Applicant Address: _____
Applicant Phone Number: _____
Property Interest: _____
TMS Number: _____
Property Location: _____

Property Characteristics:

Are there any Grand Trees proposed to be removed (24 DBH or greater)? YES ☐ NO ☐

According to Section 16-124 of The Town Code, explain in detail the conditions that exist that require the removal of the trees designated on the site plan.

Additional comments or supporting information:

Property Owner's Signature: _____ Date: _____

Approved ☐ Administrator: _____ Date: _____

Disapproved ☐
Town Council Approved ☐ Disapproved ☐ Date: _____